

Please type a plus sign (+) inside this box → ☐**TRANSMITTAL  
FORM**

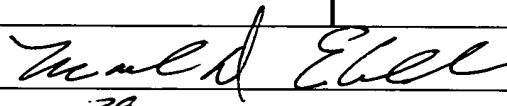
(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/674,930
	<b>Filing Date</b>	September 30, 2003
	<b>First Named Inventor</b>	Terry L. Schneider
	<b>Group Art Unit</b>	To be assigned
	<b>Examiner Name</b>	To be assigned
<b>Total Number of Pages in This Submission</b>		<b>Attorney Docket Number</b> 7784-000553/CPB

**ENCLOSURES (check all that apply)**


<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input checked="" type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): <b>Transmittal of Formal Drawings with Certificate of Mailing; Return Receipt Postcard</b>
<b>Remarks</b> The Commissioner is hereby authorized to charge any additional fees that may be required under 37 CFR 1.16 or 1.17 to Deposit Account No. 08-0750. A duplicate copy of this sheet is enclosed.		

**SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT**

Firm or Individual name	Harness, Dickey & Pierce, P.L.C.	Attorney Name Mark D. Elchuk	Reg. No. 33,686
Signature			
Date	October 29, 2003		

**CERTIFICATE OF MAILING/TRANSMISSION**

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Director of the U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, or facsimile transmitted to the U.S. Patent and Trademark Office on the date indicated below.

Typed or printed name	Mark D. Elchuk		
Signature		Date	October 29, 2003



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.: 10/674,930

Filing Date: September 30, 2003

Applicant: Terry L. Schneider

Group Art Unit: To be assigned

Examiner: To be assigned

Title: POLYMER COMPOSITE STRUCTURE REINFORCED  
WITH SHAPE MEMORY ALLOY AND METHOD OF  
MANUFACTURING SAME

Attorney Docket: 7784-000553/CPB

Director of The United States Patent and Trademark Office  
P.O. Box 1450  
Alexandria, Virginia 22313-1450

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*Oct. 29, 2003* By *Mark D. Elchuk*

**TRANSMITTAL OF FORMAL DRAWINGS**

Sir:

Enclosed for filing are four (4) "Replacement Sheets" including formal drawings (Figs. 1-13) for the above-identified patent application. Applicant respectfully requests that the enclosed FORMAL DRAWINGS replace the most recent drawings filed with the application.

Respectfully submitted,

Date: *Oct. 29, 2003*

By:

*Mark D. Elchuk*

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Reg. No. 33,686

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